ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | EN | 64934 | 10/1/00 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ ................................. Rejected | | N ................................. Non-elected | |
| = ................................. Allowed | | I ................................. Interference | |
| − (Through numeral)... Canceled | | A ................................. Appeal | |
| ÷ ................................. Restricted | | O ................................. Objected | |

APPLICATION 09/665
09/665163

Form PTO-2008
(Rev. 6/99)

WARNING
The information
Possession of

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)